

10400 Eaton Place
Suite 312
FAIRFAX, VA
Phone: (703) 385-5200
Fax: (703) 385-5080

KEATING & BENNETT LLP

Fax

#26
J.L.H
5/20/03

To: 1700 Customer Service **From:** Christopher A. Bennett
Fax: (703) 872-9309 **Date:** March 29, 2003
Phone: (703) 308-0661 **Pages:** 4
Re: Power of Attorney Documents **CC:**
 Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

Comments: 3rd request!

Application Number	09/539,691
Filing Date	March 31, 2000
First Named Inventor	Takahiro YAMAMOTO
Title	METHOD FOR MATCHING..
Group Art Unit	1732
Examiner Name	S. Staicovici
Attorney Docket Number	36856.927

Dear Sir,

Please find attached the following documents and enter these documents in the above-referenced application:

- Revocation of Power of Attorney or Authorization of Agent
- Power of Attorney or Authorization of Agent
- Statement under 37 CFR 3.73(b)

Sincerely,

Christopher A. Bennett

(R.N. 46,710)

03/29/2003 09:07 7033855080
08/16/2002 18:56 703385080P

KEATING & BENNETT
KEATING & BENNETT

PAGE 02/04
PAGE 03/04

Please type a plus sign (+) inside this



PTO/SB/82(10-00)

Approved for use through 10/31/2002. OMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/539,691
Filing Date	March 31, 2000
First Named Inventor	Takahiro YAMAMOTO
Group Art Unit	1732
Examiner Name	S. Stalcovici
Attorney Docket Number	36856.927

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number

→

Place Customer
Number Bar Code
Label here

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City			
Country	State	ZIP	
Telephone	Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF Applicant or Assignee of Record

Name	Mr. Kunisaburo Tomono
Signature	
Date	Aug. 19, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

Total of _____ forms are submitted

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this



PTO/SB/81(02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/539,691
Filing Date	March 31, 2000
First Named Inventor	Takahiro YAMAMOTO
Title	METHOD FOR MATCHING..
Group Art Unit	1732
Examiner Name	S. Stalcovich
Attorney Docket Number	36856.927

I hereby appoint:

 Practitioners at Customer Number Place Customer
Number Bar Code
Label here

OR

 Practitioner named below:

Name	Registration Number
Joseph R. Keating	37,368
Christopher A. Bennett	48,710

As my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number Place Customer
Number Bar Code
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Keating & Bennett, LLP			
Address	10400 Eaton Place			
Address	Suite 312			
City	Fairfax	State	VA	ZIP 22030
Country	USA			
Telephone	(703) 385-5200	Fax	(703) 385-5080	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF Applicant or Assignee of Record

Name	Mr. Kunisaburo Tomono
Signature	
Date	Aug. 19, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

 *Total of _____ forms are submitted

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. DO NOT SEND FEES OR